

CITY OF WORCESTER



ANNUAL REPORT

ON THE

HEALTH OF THE CITY

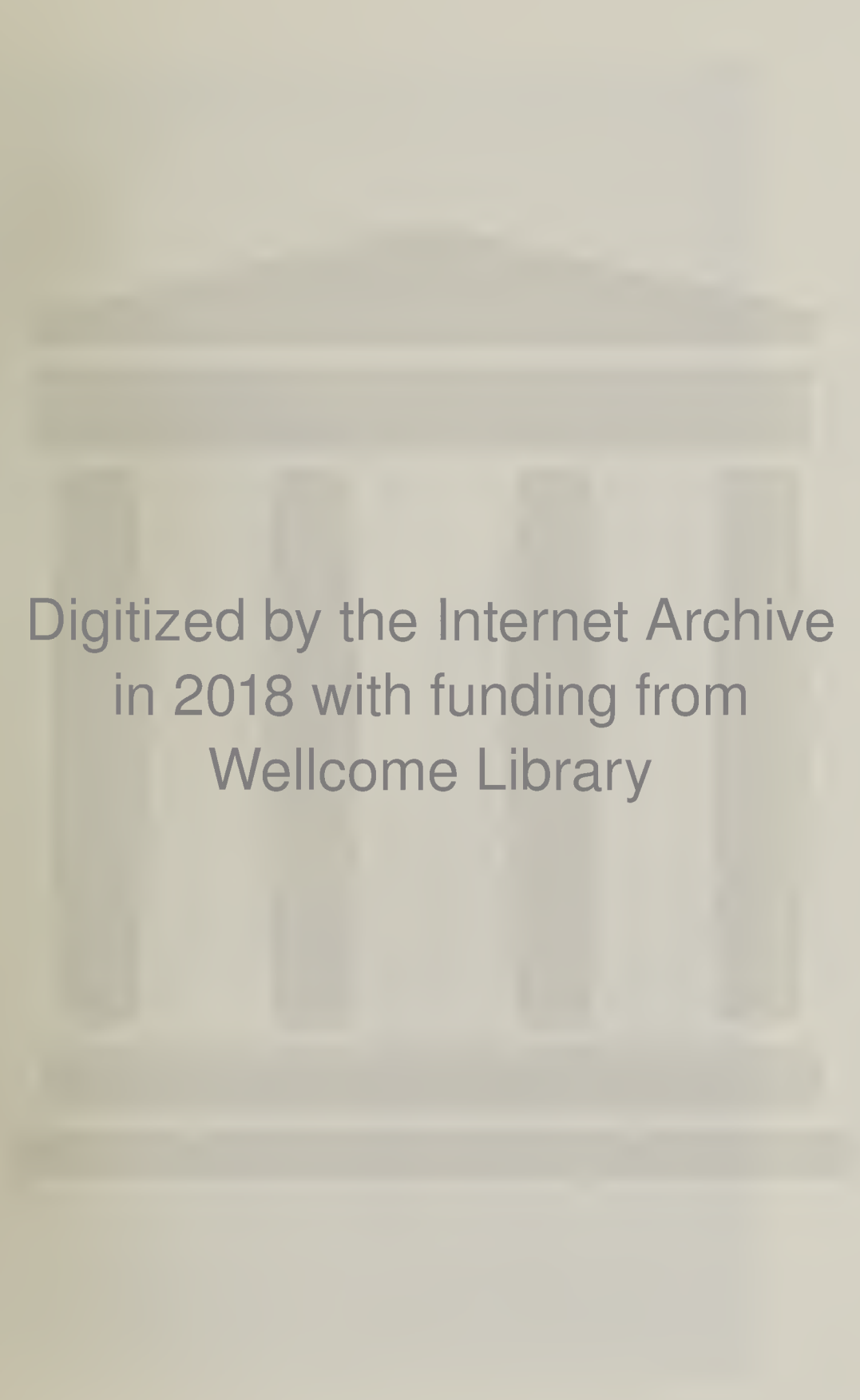
FOR THE YEAR

1969

BY

G. M. O'DONNELL, M.A., M.B., D.P.H.
Medical Officer of Health





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WORCESTER RETIREMENT CLINIC
DREADING THAT CLIMAX OF ALL HUMAN ILLS
THE INFLAMMATION OF HIS WEEKLY BILLS

Don Juan

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HEALTH COMMITTEE

31st DECEMBER, 1969

HIS WORSHIP THE MAYOR
(Councillor Mrs. Joyce Iris Brown)

Chairman : COUNCILLOR DENIS BYNG CAUGHEY, M.B.E., J.P.

Vice-Chairman: ALDERMAN ELWIN JOHN WHITT

ALDERMEN

WILLIAM JOHN DANIEL
MRS. FRANCES ROSA RATCLIFFE

COUNCILLORS

ALAN DOUGLAS ABREY
MISS AUDREY JOY MARY CROFT BAKER
MRS. ELLA BRADLEY
MRS. NORAH MABEL CAUGHEY
PATRICK JOSEPH DALY
RONALD ALFRED HINDS
MRS. DOROTHY MAY JENKINSON
JAMES SAMUEL PARKER
CHARLES HARRY PERKS
GEORGE THOMAS RANDALL
WILLIAM LESLIE THOMPSON

NON-MEMBERS OF THE COUNCIL

*Nominated by City of
Worcester Local Medical
Committee*

DR. D. W. JAMES

*Nominated by City of
Worcester Executive
Council*

MR. C. R. KNIGHT

HEALTH SUB-COMMITTEES

Health Centres

ALDERMAN DANIEL	DR. D. M. BRIERLEY
ALDERMAN MRS. RATCLIFFE	DR. J. M. DUNCAN
COUNCILLOR MRS. CAUGHEY	DR. J. B. ROGERS
COUNCILLOR RANDALL	(Nominated by Local Medical Committee)
COUNCILLOR THOMPSON	MR. W. LUDLAM
	MR. H. WALKER
	MR. C. R. KNIGHT
	(Nominated by City of Worcester Executive Council)

Mental Health Services

ALDERMAN DANIEL	MR. W. LUDLAM
ALDERMAN MRS. RATCLIFFE	MR. H. WALKER
COUNCILLOR MRS. BRADLEY	(Nominated by City of Worcester Executive Council)
COUNCILLOR THOMPSON	

Property Inspection

ALDERMAN DANIEL
COUNCILLOR MRS. BRADLEY
COUNCILLOR HINDS
COUNCILLOR MRS. JENKINSON
COUNCILLOR PARKER
COUNCILLOR THOMPSON

PUBLIC HEALTH DEPARTMENT STAFF, 1969

Medical Officer of Health and Principal School Medical Officer :

G. M. O'DONNELL, M.A., M.B., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer :

J. T. ROBERTS, M.B., B.S., D.P.H.

Medical Officers in Department :

MOIRA K. E. ALLINGTON, B.A., M.B., B.Ch., D.C.H., D.P.H.
(ceased 7th February, 1969)

DOUGLAS G. SNELL, M.B., B.S., D.P.H., D.T.M.

Chest Physician (Part-time) :

EDGAR N. MOYES, M.D., F.R.C.P.

(to 31st March, 1969)

(Chest Physician, Regional Hospital Board)

Honorary Adviser in Mental Health :

A. M. SPENCER, B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M.

Psychiatrist (Part-time) :

EILEEN M. WHITELAW, M.B., B.S.

Public Analyst :

W. E. JONES, M.Sc., F.R.I.C. (County Analyst—Services utilised
by arrangement with Worcestershire County Council)

Principal Dental Officer :

E. R. DOWLAND, L.D.S., R.C.S. (Eng.)

Senior Dental Officer :

K. A. FELLOWS, L.D.S.

Dental Officers (Part-time) :

MRS. B. SAVAGE, B.D.S.

R. WEBLEY, L.D.S.

Dental Anaesthetists (Part-time) :

H. HARVEY, M.D., M.B., B.S., D.A.

C. T. MILLS, M.B., Ch.B. (Resigned 17th August, 1969)

W. D. STEEL, M.B., B.S., M.R.C.S., L.R.C.P.

Dental Surgery Assistants :

MRS. R. J. YOUNG
 MISS M. PARTRIDGE
 MRS. L. A. DOVEY

Chief Public Health Inspector :

T. W. MARSDEN

Deputy Chief Public Health Inspector :

J. H. BENJAMIN

District Public Health Inspectors :

J. HARTLEY
 G. D. HALES
 T. C. COLEMAN
 P. C. BEECH

Pupil Public Health Inspectors :

M. MILLEN
 B. C. R. DICKENS (ceased 31st December, 1969)

Meat Inspector :

G. W. GLENDENNING

Rodent Officer :

H. A. WILLIS

Rodent Operative :

R. JONES

Driver/Handyman :

S. MORGAN

Principal Nursing Officer and Non-Medical Supervisor of Midwives :

MISS O. KEYWOOD

Deputy Principal Nursing Officer and Deputy Non-Medical Supervisor of Midwives :

MRS. E. S. SMITH

Health Visitors/School Nurses :

MRS. M. E. HOWE (ceased 6th May, 1969)
 MISS P. HIGGINS
 MISS J. M. TEECE
 MRS. C. E. CHRISTOPHER
 MRS. M. HEATON
 MRS. J. KILLAH (ceased 26th September, 1969)
 MRS. U. M. AUSTIN
 MRS. E. F. WARDLE
 MRS. S. H. BONWICK (commenced 17th November, 1969)
 MRS. M. SMITH (commenced 14th July, 1969)
 MISS J. R. L. MORGAN (commenced 3rd March, 1969)
 MISS I. PESTRIDGE (commenced 9th September, 1969)
 MRS. P. SHUKER (commenced 9th September, 1969)
 MRS. M. E. HOLMES (Geriatric Health Visitor part-time)

Trainee Health Visitor :

MISS J. M. DEWEY (commenced 16th September, 1969)

Clinic Nurses (Temporary Appointments) :

MRS. P. T. CLEATHERO
 MRS. P. FELLOWS (commenced 16th September, 1969)

Senior District Nurse :

MISS M. J. CARTWRIGHT

Geriatric District Nurse :

MRS. P. LISTER (ceased April, 1969)
 MRS. M. NAYLOR (commenced 13th April, 1969)

District Nurses :

MRS. E. LOCK
 MR. J. EDWARDS (ceased 30th June, 1969)
 MRS. S. R. BERESFORD
 MRS. J. COOPER
 MISS A. FEELEY
 MR. R. O. PHILPOT
 MISS R. E. WELLSTED
 MR. V. CONNELLAN
 MRS. A. J. HIGLEY (ceased 28th February, 1969)
 MR. J. GRAY (commenced 1st September, 1969)
 MISS P. EVANS

District Nurses (Part-time) :

MRS. S. K. DRINKWATER
 MRS. G. HURST
 MRS. G. M. HART
 MRS. A. E. BROOKES
 MRS. A. V. J. DAVIS
 MRS. E. S. S. CARTER
 MRS. S. Y. HEFFORD
 MRS. B. FAWDRY
 MRS. E. P. COUPLAND
 MRS. W. E. M. SOUTHGATE
 MRS. A. ROLLINGS

Midwives :

MISS F. MIDWINTER
 MISS M. F. WILLIAMS
 MRS. R. CHONG

Clerk, Nursing Institute :

MRS. M. M. ANDERTON

Social Worker (Part-time) :

MISS M. E. BARLING (ceased 12th September, 1969)

Chiropodists (Part-time) :

MRS. M. R. GILBERT
 MISS J. E. PRICE
 MR. R. J. BAILEY

Senior Mental Welfare Officer :

MR. P. Y. GRIFFITH

Mental Welfare Officers :

D. H. MCGILVRAY
 MRS. B. WILSON (commenced 13th January, 1969 ; ceased
 30th September, 1969)
 MR. P. JELF (commenced 21st July, 1969)
 MRS. D. M. K. AITZETMULLER (commenced 24th November,
 1969)

Home Help Organiser :

MISS C. J. PAIN

Assistant Home Help Organiser :

MRS. M. J. LUCEY

Chief Clerk :

A. J. RIX

Senior Clerk :

MISS E. C. GRIFFIN

Secretary to Medical Officer of Health :

MISS M. M. PARSONS

Clerical Officers :

MISS E. BISHOP

MISS M. F. DUNNE

and 10 full-time clerks

Manager/ Superintendent Perryfields Adult Training Centre and Residential Hostel :

W. T. BAYLAY

Assistant Superintendent, Residential Hostel, Perryfields :

MRS. N. T. FARRANT (commenced 13th January, 1969)

Senior Assistant Supervisor, Adult Training Centre :

MRS. L. J. BOWER

Assistant Supervisors, Adult Training Centre :

MRS. J. BEDFORD

MISS B. POWELL (ceased 20th March, 1969)

MRS. C. BIRCH (commenced 1st April, 1969)

Instructors, Adult Training Centre :

D. W. ROBINSON

J. JONES

Assistant Instructor, Adult Training Centre :

MRS. C. BIRCH (change of appointment, 1st April, 1969)

MISS C. M. CHAINEY (commenced 1st July, 1969)

ANNUAL REPORT

ON THE

HEALTH OF THE CITY

BY

G. M. O'DONNELL, M.A., M.B., D.P.H.

*To the Right Worshipful the Mayor, Aldermen and Councillors
of the City of Worcester.*

MR. MAYOR, LADIES AND GENTLEMEN,

In an ordinary year, the completion of his Annual Report is an occasion of satisfaction, even of rejoicing, to a Medical Officer of Health. Like the Pilgrim Fathers he can feel that the harvest is now in and the delights of Thanksgiving Day are at hand. Unfortunately they are not. But it is still pleasant to record that a year has gone by without catastrophe or adverse visitations.

For the City of Worcester I am glad to report that 1969 was free of rapine, disorder, civil riot, and blustering contagion. No wanton epidemic raged. The great pox and the lesser were singularly inactive and only tourists returning from the paella ridden wastes of the south lands were unduly troubled by infirmities of the flesh. There has been no public outcry over the relegation of our water supply to the South West Worcestershire Water Board. To purists like myself the new product seems to lack the subtle bouquet and fine body of the past, but it remains a passable enough vintage which one could offer to a Bishop without affront. However, in one major aspect, it is wanting. While the water supply was the responsibility of the City it was customarily blamed for any sanitary disaster. "It's the water", was the traditional apologia on all but official lips. Whether we can use this excuse with the same abandon now it is the property of such an august and sonoric body as the South West Worcestershire Water Board remains to be seen.

Again, the remarkable good humour, composure and innate tranquillity of Worcester people was popularly attributed to the initiative of the City Fathers adding bromides to the reservoir in times of urban dispute. This canard is unlikely to be repeated.

I am afraid that the passing of our water supply is but a sign of the times and that many other services related to the

health and safety of the people will soon be removed from effective medical control. This is based on an old military principal of separating the gun from the ammunition — it may lose the battle but it's a great incentive to peace.

The division of Health and Social Services as envisaged by Lord Seebohm and his colleagues and embodied now in the Local Authority Social Services Act, is one such issue. Here we have a new and exciting concept of community care which should appeal to all but the ratiocinative among us.

I feel sure that the rôle of the Health Committee in the immediate future will be an intriguing one. Meanwhile I would most sincerely thank my Chairman, Councillor D. B. Caughey, M.B.E., J.P. and the members of the Health Committee for their continuing help and encouragement during the year.

My colleagues in other departments and organisations have afforded me every courtesy and assistance and in particular I should like to acknowledge the support and co-operation of those in my own profession.

Lastly I should like to thank the staff of the Health Department for the conscientious and devoted manner in which they have carried out their duties. For them, these are difficult and uncertain times and I would console them with the words of Caligula :

Change may refurbish lives and minds renew;
Or lead to blackest mischief. Either's true.

Yours faithfully,

G. M. O'DONNELL

A MESSAGE FROM GARCIA

Last year under the title "Farewell, My Lovely" I commented on the misfortunes of our bed bug community. Subsequently I received the following letter which would indicate that I had been unduly pessimistic.

Dear Sir,

In your Annual Report for 1968, you referred somewhat nostalgically to the rapid decline of my race. It is true that the various forms of genocide practiced against us have greatly reduced our numbers, but I must take issue with you on your contention that we will soon be extinct in these isles.

I agree that for some years we have lost heart. This is mainly due to changes in nutrition for, as you know, we are dependent on humans to a great extent for our staple food. Unfortunately your blood has deteriorated in the last decade and has lost the piquancy and freshness that so delighted us in the past. Furthermore, the addition of tranquillisers, DDT, nicotine, alcohol and other curious substances makes it repugnant to those of us of strict upbringing, while the advent of the pill imposes a compulsory contraception alien to our principles. For these reasons we have been obliged to forsake our traditional supplies and obtain sustenance from coarser species.

A further small point. We are an austere community with few pleasures but have always considered blue blood to be our one luxury and have been grateful to those who, however reluctantly, provided us with this delicacy. Your Trade Descriptions Act now shows that there is virtually no difference between this and the product of the common herd. We are naturally confused and disappointed and even those of us who cannot accept such a ruling, are at a loss how to classify life peers.

Sir, you will appreciate that progress has not been kind to us and our established way of life is endangered. But you have forgotten our qualities of resilience, ingenuity and improvisation. We

have not lived in these isles so long that we would lightly desert you now. Indeed we are at present engaged in plans to accompany you most willingly into the Common Market, should this need arise.

Yours faithfully,

CIMEX LECTULARIUS.

Church House.

FLUORIDATION

There is a school of thought attributing most of the troubles of our young people to lack of discipline and too easy a life. It must rejoice their hearts when they read of local authorities rejecting fluoridation of water supplies. Certainly the children of the areas involved will learn at an early age of the torment of dental pain and doubtless their characters will be strengthened as a result. It would, however, be logical to extend this spartan attitude so that adults could also benefit. This could easily be done by prohibiting chlorination. There are still many people alive who can remember the tumult caused by the addition of chlorine to our water and the denunciation of those who added this noxious poison to protect the community.

The banning of chlorination and the subsequent outbreaks of typhoid, leptospirosis and other horrendous conditions would certainly make us less worldly, more conscious of the frailty of life and of a stronger moral fibre. Furthermore, we should at last be drinking Pure Water, so persistently extolled by its advocates, free of artificial additives and rich in those of Nature — viruses, bacteria, flagellae, animalculae galore. Can we not hope, therefore, for a step forward by the antagonists of fluoridation to embrace also the principal of anti-chlorination? This would indeed engender more feasts of reason and flows of soul.

THE ULTIMATE DETERRENT

In recent years we have been blessed with such a wealth of legislation on our health and welfare that it would seem logical to introduce an Act forbidding Death itself.

My suggestion is not as bizarre as it would seem as most people die of their own accord and are always willing to comply with the edicts of Government. Furthermore, the time is not so very distant when physical death will be almost indefinitely postponed so it would be natural for our lawgivers to anticipate this situation.

By outlawing Death, we would at one stroke make our older citizens young again, heal the generation gap, erase from the English language a number of horrible euphemisms, alter dramatically the content of the Sunday sermon, perplex the predestinators, evoke the admiration of all civilised peoples and the envy of the two world powers — the C.I.A. and the K.G.B.

Infractions of the law would incur penalties which would necessarily be of a financial nature.

It is only by the application of such bold and progressive measures that the National Health Service can be saved from coming to an untimely end, passing on, passing over, falling asleep, shuffling off this mortal coil, or going to its last account.

CIRCULAR 1/70

Request for specific information on certain subjects.

(a) Attachment or Liaison Schemes.

All health visitors and the majority of district nurses were attached to general practices in the City during the year. The Medical Officer of Health was appointed Director of Welfare and the social welfare officers of the Welfare Department along with the geriatric visitors of the Health Department were also attached to general practices with the specific main duty of visiting the older patients not receiving active treatment.

(b) Notification of Congenital Defects.

Proceeding without difficulty.

(c) Fluoridation of Water Supplies.

Next year in Jerusalem.

GENERAL STATISTICS

				City of Worcester	England and Wales
Area (in acres)	...	...	...	6114	—
Estimated population	...	...	...	71540	—
Number of inhabited dwellings	...	...	...	24,666	—
Number of persons per dwelling	...	...	...	2.9	—
Rateable value of the borough	...	...	...	£3,289,590	—
Product of a Penny Rate	...	...	...	13,440	—

VITAL STATISTICS

	City of Worcester	England and Wales
Live Births		
Number	1236	797,542
Rate per 1,000 population ...	16.8	16.3
Illegitimate Live Births per cent of total live births	7.0	8.0
Stillbirths		
Number	14	10.662
Rate per 1,000 total live and still- births	11.0	13.0
Total Live and Stillbirths	1250	808.204
Infant deaths (deaths under 1 year)	21	14.397
Infant Mortality Rates		
Total infant deaths per 1,000 total live births	17	18.0
Legitimate infant deaths per 1,000 legitimate live births	17.0	17.0
Illegitimate infant deaths per 1,000 illegitimate live births	11.0	25.0
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	13.0	12.0
Early neo-natal M o r t a l i t y Rate (deaths under 1 week per 1,000 total live births)	11	10.0
Perinatal Mortality Rate (still births and deaths under 1 week combined per 1,000 total live and stillbirths)	22	23.0
Maternal Mortality (including abor- tions)—No. of deaths	NIL	
Deaths		
Number	822	579.463
Rate per 1,000 population ...	11.3	11.9
Number of deaths from tuberculosis (four respiratory, two non-respir- atory)	6	—
Tuberculosis deaths rate per 1,000 population	0.08	—

The following International Abbreviated List of deaths published by the Registrar General details the deaths under 50 causes.

	Under 4 weeks		4 weeks and under 1 year		Age in Years												Totals		Grand Total					
	4 weeks		1 year		1+		5+		15+		25+		35+		45+		55+			65+		75+		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		M	F	M	F	
B4 Enteritis and Other Diarrhoeal diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B5 Tuberculosis of Respiratory system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B6 Other Tuberculosis, including late effects	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
B11 Meningococcal Infection	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B17 Syphilis and its sequelae	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
B19 (1) Malignant Neoplasm, Buccal cavity etc	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5	
B19 (2) Malignant Neoplasm, Oesophagus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B19 (3) Malignant Neoplasm, Stomach	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	13	
B19 (4) Malignant Neoplasm, Intestine	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	25	
B19 (6) Malignant Neoplasm, Lung, Bronchus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	49	
B19 (7) Malignant Neoplasm, Breast	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	17	
B19 (8) Malignant Neoplasm, Uterus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B19 (9) Malignant Neoplasm, Prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B19 (10) Leukaemia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B19 (11) Other Malignant Neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	
B20 Benign and Unspecified Neoplasms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	49	
B21 Diabetes Mellitus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
B46 (1) Other Endocrine etc. Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B23 Anaemias	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
B46 (3) Mental Disorders	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
B46 (4) Other Diseases of Nervous System, etc	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B26 Chronic Rheumatic Heart Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6	
B27 Hypertensive Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
B28 Ischaemic Heart Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B29 Other Forms of Heart Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
B30 Cerebrovascular Disease	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	
B46 (5) Other Diseases of Circulatory System	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	33	
B31 Influenza	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	
B32 Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	43	
B33 (1) Bronchitis and Emphysema	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B33 (2) Asthma	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11	
B46 (6) Other Diseases of Respiratory system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	58	
B34 Peptic Ulcer	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B36 Intestinal Obstruction and Hernia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11	
B37 Cirrhosis of Liver	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B46 (7) Other Diseases of Digestive System	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	
B38 Nephritis and Nephrosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B39 Hyperplasia of Prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	9	
B46 (8) Other diseases, Genito-Urinary system	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	
B46 (9) Diseases of Skin, Subcutaneous Tissue	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	
B46 (10) Diseases of Musculo-Skeletal System	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	
B42 Congenital Anomalies	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B43 Birth injury, difficult labour etc.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B44 Other Causes of Perinatal Mortality	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
B45 Symptoms and ill-defined conditions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	8	
BE47 Motor vehicle accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
BE48 All Other Accidents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	
BE50 All Other External Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	13	
TOTAL ALL CAUSES	11	5	2	3	1	1	2	2	5	1	3	3	7	11	28	17	92	49	126	97	136	220	409	822

HEALTH STATISTICS

1969 was rather a good year for Worcester, as with the exception of the increase of one in the number of stillbirths, all the inclusive rates were down. This showed itself particularly in the infant death rates as the infant mortality rate fell to 17 and the perinatal mortality rate to 22. There were no maternal deaths and the general mortality rate per 1,000 population sank from 12.29 to 11.3.

The birth rate rose slightly and illegitimate live births obligingly subsided in harmony with our ecclesiastical ambience to below the national average. Indeed, I understand that some institutions dependent on our patronage in this respect are now feeling the draught of too much virtue.

Among the causes of death it was interesting to note that there was an increase in the number of deaths due to cancer, mainly resulting from the large rise in mortality from lung cancer. As one would expect most of the victims were men throwing their lives away with their cigarette stumps. Bronchitis and emphysema, which again are often related to cigarette smoking, also increased.

On the credit side, the see-saw went down for cardiac and cerebrovascular disease, while there was also a welcome decrease in deaths from motor vehicle accidents. No suicides occurred during the year.

CAUSES OF INFANT DEATHS

Causes:—	Under 1 week	Under 4 weeks	Under 1 year
Prematurity	8	8	8
Hydrocephalus	1	2	5
Congenital Heart Disease ...	3	3	4
Haemolytic Disease of the Newborn	1	1	1
Respiratory Distress Syndrome	1	1	1
Septicaemia	—	—	1
Escomphalus	—	1	1
Total ...	14	16	21
Where Died:—			
Home	—	1	1
Hospitals in this area	14	14	17
Hospitals outside this area ...	—	1	3
Total ...	14	16	21

NATIONAL HEALTH SERVICE ACT, 1946

Section 21 — Health Centres

Next year should see the opening of our first health centre on which work is now proceeding apace. It is encouraging to see this tangible evidence of a new outlook in medicine taking form amid the rubble of one of our largest areas of slum clearance. Even those engaged in its construction seem impressed by the monumental nature of the work which they are undertaking, laying on mortar with reverence and installing piping with a curious, yet touching unction.

Section 22 — Care of Expectant and Nursing Mothers and Children under School Age.

(a) Ante Natal Clinics

The object of antenatal care is to help the mother to remain fit and well during her pregnancy and to do everything possible to ensure that she is safely delivered of a healthy uninjured baby. Sessions are held weekly at Warndon Clinic and also at the Tything Nursing Institute Clinic. These clinics are staffed by the domiciliary midwives and their pupils and they regularly see the expectant mothers who have arranged for their confinements to take place in their own homes. During 1969, 280 expectant mothers attended these clinics.

(b) Parentcraft and Relaxation Classes

These classes, held at the Tything Nursing Institute and Powells Row Clinic, St. Johns, continue to be most popular. In 1969, 267 mothers made 1,168 attendances.

(c) Care of Unmarried Mothers.

This work is carried out for us by the Worcester Diocesan Association for Family and Social Service whose social worker, Mrs. N. Angelbeck, undertakes the necessary visiting. The Health Committee was financially responsible for the care of six mothers in appropriate Mother and Baby Homes.

(d) Dental Care of Expectant Mothers and Young Children.

Mr. E. R. Dowland, Principal Dental Officer, reports as follows :

Fourteen mothers were inspected and found to be in need of treatment.

Twenty-one fillings were done and fourteen teeth extracted. Five mothers were fitted with a total of eight dentures, and twelve mothers were made dentally fit.

Forty-seven were inspected and forty-two needed treatment.

Twenty-six fillings were done and six teeth conserved by Silver Nitrate application.

Eighty-seven teeth were extracted under general anaesthetic.

There were fourteen emergency visits among these young patients, and the fact that in the majority of cases this was their first visit, shows that many parents are not keen to bring children to the dentist until pain makes the visit necessary.

(e) Child Health Centres.

The old term "Child Welfare Clinic" is now being replaced by the title "Child Health Centre" as this suggests a more positive approach to the health and wellbeing of the child than does the old phraseology.

In our regular clinic buildings eight sessions per week are held, a doctor being present at six of these sessions. Church Halls are used for five other periods each fortnight, and here again a doctor is present on four occasions. One or more health visitors attend every clinic. It will be an interesting speculation for those interested in environmental studies to determine whether this deviation into sacred and profane premises has any residual effect upon children, parents and staff.

During the year 2,982 children were seen at the clinics, making in all 17,625 attendances.

(f) Family Planning.

I am grateful to Dr. Mary Harcup for the following report :
 "Until Thursday, 11th December, 1969, the work of the Women's Advisory Clinics was normal routine, then on this date The Committee on Safety of Drugs' report on oral contraceptives containing oestrogens, was leaked to the press

and mass media. Thereafter the rest of the year has been far from routine.

The statistical analysis of the side effects occurring in patients taking oral contraceptives had revealed the incidence of thrombo-embolic episodes to be lower in preparations containing less than 50 microgrammes of oestrogen. The Committee on Safety of Drugs attempted to forewarn the manufacturing Drug Companies of their findings prior to notifying the medical profession, but there was a "leak", so the Committee issued an immediate statement, via the mass media, recommending that lower dose pills should be used. This statement, which was not accompanied by the publication of the new statistical evidence, confused public, press and medical profession alike. Most doctors had to wait several days for their official notification of the Committee's findings — the doctor running our clinics had to wait four days for hers.

The immediate effect was that all oral contraceptive patients wanted medical advice (some abandoned the pill as too dangerous) and there was a national shortage of the lower dose products. On both of these accounts it was necessary to hold extra and extended sessions in the City of Worcester. The effect has been noticeable during the rest of the year too. For some months there was a marked decrease in the number of new patients wishing to begin oral contraception. The women who had to change their dosage often had side effects from the new preparation, whereas they had felt well on the higher dosage pill. In short, our patients were perhaps unduly worried and certainly needed extra time to discuss their questions and problems with medical and nursing staff.

The crisis of December, 1969, is over. The Drug Safety Committee continue with their invaluable work and we hope and anticipate they will have further knowledge on drug side-effects to contribute to medicine. We hope, too, that following the howls of protest which came to them from doctors and local authorities, including our own, future findings will be disseminated with the impeccable expertise that so occasionally distinguishes the information and public relations service.

(g) Daily Minding Service.

During 1969 there has been a tremendous increase in the number of child minders registered with the Local Health Authority. This is because the Health Services and Public Health Act, 1968, requires all persons providing daytime care

for payment for one or more children, to register. Prior to this legislation, registration was not necessary for less than three children. Of the 43 child minders registered at the end of 1969, 39 care for only one or two children.

A regular daily minding service is provided by the Local Health Authority for children in certain priority groups, e.g. children of unsupported mothers. During the year this service was made available to 30 children.

(h) Play Groups.

Play groups aim to provide a stimulating environment in which children between the ages of three and five can mix with other children and widen their interests and activities. These Groups are organised by private individuals but are required to register with the Local Health Authority and are subject to their inspection. At the end of 1969 there were 15 registered groups, providing in all 362 places.

The growth of these Play Groups is most gratifying and the enthusiasm of the organisers was sufficient to justify the Worcester Technical College providing a training course for Play Group staff in the autumn of 1969.

(i) Welfare Foods.

During 1968 and 1969 the following quantities of welfare foods were bought by the public :

	1968	1969
National Dried Milk (Full Cream) ...	9,274	8,152
National Dried Milk (Half Cream) ...	25	13
Cod Liver Oil Bottles ...	905	913
Vitamins A and D Packets ...	869	899
Orange Juice Bottles ...	16,939	20,184

(j) National Society for the Prevention of Cruelty to Children

I should like to thank the Worcester and Mid-Worcestershire Branch of the N.S.P.C.C. and their inspector, Mr. William Andrews, for the help given to the Department during the year and for their concern and solicitude in the care of the more unfortunate children in this area.

(k) Assessment of Very Young Children.

Dr. Douglas Snell reports :

Apart from the small number of children who develop, or are born with gross physical defects, it is at the time of the first birthday that the doctors record the development and progress of the majority of babies brought before them. Their number includes all those attending the Clinic regularly and, therefore, coming up in any case on the first birthday for their third immunisation against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis. In addition, health visitors invite other mothers to bring up their children for a first birthday examination even though they look to their family doctor for all medical and health care. Often they do this very willingly and no doubt enjoy the opportunity this gives them of obtaining a "second opinion" on their child. No further routine progress assessments are made until the child gets to school.

However, should doubts be raised at any time about the development of a child by the parents, the health visitor, the doctors or hospital consultants, a more detailed investigation can be arranged. This will take the form of a general medical examination and an assessment of the child's development using the Scales associated with the names of Stanford Binet, Ruth Griffiths and Mary Sheridan. Should a child be found to be so severely handicapped that doubts arise as to whether he is going to be fit for ordinary classroom teaching, he may be referred for further assessment to the staff of Lea Castle Hospital, near Bromsgrove.

During the year some 20 Ruth Griffiths' Tests were carried out, but many of the children exhibited rather delayed development in one particular aspect only and subsequently managed to catch up. In such cases the tests are helpful in giving reassurance to the parents and enabling the doctor to give useful advice regarding home training.

(l) Congenital Abnormalities

The following table shows a list of congenital defects graded according to the official classification and notified to the Department of Health for inclusion in the 1969 statistics :

Central Nervous System

Anencephalus	...	...	...	...	...	1
Spina Bifida	...	...	...	...	...	2
Hydrocephalus	...	...	...	...	...	3

Alimentary System

Cleft lip	...	...	...	...	...	1
Malformations of tongue	...	...	...	...	...	1
Other Specified malformations of alimentary system	...	...	...	...	...	1

Limbs

Polydactyly	...	...	...	...	...	2
Syndactyly	...	...	...	...	...	2
Reduction deformity hand or arm	...	...	...	...	...	2
Talipes	...	...	...	...	...	5
Congenital dislocation of hip	...	...	...	...	...	12
Unspecified limb malformations	...	...	...	...	...	1

Other Systems

Other malformations of face and neck	...	...	...	...	...	1
Exomphalos, omphalocele (excluding umbilical hernia)	...	...	...	...	...	1
Other specified malformations of skin including ichthyosis congenita	...	...	...	...	...	3

Other Malformations

Down's syndrome (monogolism)	...	...	...	...	...	1
------------------------------	-----	-----	-----	-----	-----	---

(m) All Risks/Observation Register.

This register, which includes the names of all those found to have a defect as well as those considered to be in an especial danger of becoming handicapped now numbers some 300 children who are kept under close scrutiny.

Screening for hearing loss is being continued and during the year 113 children failed the first test and had to be re-examined. Those who failed the second test were referred to the teacher of the deaf and the E.N.T. clinic.

(n) Phenylketonuria.

The number of tests during 1969 was 1,084, all of which were found to be negative.

DOMICILIARY NURSING SERVICES

I am indebted to Miss Olive Keywood, our Principal Nursing Officer, for the support which she has given me during the year and for the main content of the following reports on the nursing services.

Probably one of the most outstanding features of the nursing services in 1969 has been the extent to which they have been involved in schemes which should result in greater co-operation between hospital and community services. If we are to give to our patients the best possible service, this co-operation is essential to ensure that the optimum use is made of available resources and personnel, and that no interruption occurs in care and treatment when a patient is transferred from hospital to home or vice versa.

Twice each year the Advisory Committee of the Public Health Nursing Officers meets at the offices of the Birmingham Regional Hospital Board. These meetings, attended by the Principal Nursing Officer or her Deputy, enable a useful exchange of views and information to take place between staff working in the hospital and those working in the public health field.

The Worcester Technical College regularly organises management courses for nursing staff and we have been happy to accept invitations to tell the participants something of the services which are available to the patient being cared for in his own home.

In 1968, the General Nursing Council and the Queen's Institute of District Nursing approved a scheme whereby pupil enrolled nurses training at the Evesham School of Nursing might take a course of instruction in district nursing during their basic training. This scheme has now become well established and during 1969, seven pupil nurses completed the course. Of these, six were successful in the examination.

Six pupil enrolled nurses from St. Wulstan's Hospital have each spent a week with us. Talks have been given on Local Authority Services, and they have visited with district nurses, health visitors and midwives, as well as observing the work of Play Groups, Child Health Clinics, Cervical Cytology Clinics and Day Nurseries. Similar experience has been arranged for student registered nurses at Powick Hospital.

Visits of observation have also been arranged for student nurses from the Worcester Royal Infirmary.

A symposium on "Short Stay Surgery" was arranged in November by the Birmingham Regional Hospital Board. The possibilities of greater co-operation between the domiciliary services and the hospital in the care of surgical patients were discussed. The two members of the nursing staff who attended found the papers presented at this symposium most interesting, but in addition, they felt that the opportunity to meet and talk with their colleagues in the hospital field, was a most valuable way of furthering co-operation.

Midwifery

189 mothers were delivered in their own homes in 1969, while a further 567 were attended by the domiciliary midwives after their discharge from hospital.

Eight pupil midwives completed their midwifery training and all were successful in their qualifying examination.

Miss Fay Midwinter, the senior teaching district midwife, attended a statutory refresher course.

Health Visiting

In September we were pleased to welcome to the health visiting staff, Miss Pestridge and Mrs. Shuker who had successfully completed their course of training at Cheltenham. In October Miss Dewey started her health visitor training and we look forward to her joining the regular staff next year.

Although our student health visitors attend the Technical College for their training, a large amount of the practical fieldwork training is undertaken in Worcester. In April, Mrs. Howe, who for the past five years had taken the responsibility for this work, left Worcester. Miss Teece, an experienced health visitor on our staff, has now attended a Fieldwork Instructors' course to enable her to undertake the practical training of our students.

Once again by courtesy of the Worcestershire County Council, instruction has been given to our health visitors in the techniques of testing the hearing of very young children. This is a most important aspect of the work of the health visitor. A child with defective hearing can be so deprived of many of the ordinary everyday experiences of life that his

mental development may well be retarded. Early diagnosis of any hearing loss enables treatment or training to be instituted to help the child develop to his or her full potential.

In 1958 a detailed survey was made of all babies born in the first week of March. These children are now the subject of the National Child Development Study and in 1969, the health visitors were asked to visit and report on these eleven year olds. Sixteen families in Worcester were concerned in this Study and with their co-operation the appropriate information was conveyed to the organisers of this large and important research undertaking.

The work of the health visitor is demanding and the range of her duties is ever increasing. So many of the problems which reach her have no easy solution and we are very fortunate in having such a loyal band of health visitors who combine considerable nursing skill and experience with the ability to view children or parents in the context of the family as a whole. In this they are greatly helped by their attachment to general practices.

Home Nursing

Don't be terse
with the District Nurse.
Rather cajole or wheedle
She's quick with the needle.

The large number of visits carried out by district nurses during the year and the high quality of their work should be an occasion of thought to the community. When one sees how strenuous and often unpleasant their duties are and recognises the sympathy, affection and skill they devote to their patients, even the most crabbed of us must be impressed. Perhaps the men and women engaged in this field are fortunate in having a job which is both worthwhile and exacting, demanding high qualification. But does the job develop compassion and the desire to serve in even those lacking these qualities, or is it that persons particularly blessed with them are attracted to district nursing?

During 1969 the district nurses paid 64,084 visits to 1,583 patients, the number of visits to patients over the age of 65 being 48,089.

Five state registered nurses entered for the National Examination in District Nursing and all were successful.

Record of Immunisations and Vaccinations carried out during the year 1969:

Number of children who completed a primary course against:—	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962-1964		
Diphtheria	38	518	56	8	110	53	783
Whooping Cough ...	38	516	55	7	3	—	619
Tetanus	38	518	58	11	118	143	886
Poliomyelitis	41	531	64	9	135	71	851
Number of children who received a reinforcing dose against—							
Diphtheria	—	254	546	38	1,220	110	2,168
Whooping Cough ...	—	253	532	34	165	4	988
Tetanus	—	254	546	39	1,230	675	2,744
Poliomyelitis	—	262	531	47	1,203	733	2,776

Marie Curie Memorial Foundation

Through the generosity of the Marie Curie Memorial Foundation it has been possible to provide extra nursing for 29 very ill cancer patients at a total cost of £375. A further £28 has been spent on dressings not available under the National Health Service, and on the hire of special equipment.

Although no charge is made for the help which the Marie Curie Foundation gives, donations are always very welcome and it is with great pleasure that we are able to report that over £109 was donated locally to this very worthwhile organisation.

Provision of Nursing Equipment

1,005 items of equipment have been loaned to patients during the year. These have ranged from small items such as back-rests and bedcradles to big modern articles, such as hydraulic hoists for lifting heavy patients.

Incontinence sheets have been supplied to 218 patients, while another 138 ambulant, but incontinent patients have received incontinence pants and pads.

Section 26 — Vaccination and Immunisation

For some years we have been able to maintain a very high rate of vaccination and immunisation and the Ministry's table printed below shows that this high standard has been continued. Our figures are very considerably in advance of the national average and it is pleasant to record that this favourable position has been achieved, not only by the enthusiasm of the Health Department staff, but also through the co-operation of the general practitioners who have done all they can to secure maximum protection for the children under their care.

It would, however, not be fair to allocate all praise to the health services. In the end, the success of a vaccination and immunisation programme for children depends on the attitude of the parents and here we have been particularly fortunate. Certainly parents in the City have been quick to realise the value of this service and to make sure that their offspring benefit by it.

PERCENTAGES OF CHILDREN VACCINATED BY 31.12.69

Local Health Authority	Children born in 1967			Children born in 1968			Smallpox (Children under 2)
	Whooping Cough	Diphtheria	Polio- myelitis	Whooping Cough	Diphtheria	Polio- myelitis	
England and Wales ...	81	83	80	66	67	65	31
England ...	81	83	80	66	68	65	32
WORCESTER ...	95	95	95	82	82	83	68

Smallpox :

There was a small decline in the number of primary vaccinations against smallpox during the year (910 v. 944 in 1968) but the number of those re-vaccinated increased greatly (1,434 v. 557 in 1968).

Age at date of vaccination	Number of persons vaccinated (or re-vaccinated) during the year ended 31st December, 1969	
	Number vaccinated	Number revaccinated
0 to 3 months	10	—
3 to 6 months	8	—
6 to 9 months	1	—
9 to 12 months	—	—
1 year	793	—
2 to 4	76	—
5 to 15	22	1,434
Total	910	1,434

Measles :

Statistics submitted to the Ministry were as follows :

Year of Birth				Others under age 16	Total
1968	1967	1966	1962-1965		
295	259	149	213	7	923

B.C.G.

B.C.G. vaccination supplied under Section 28 of the National Health Service Act, is also carried out and it is perhaps more appropriate to include the results of this with the other forms of immunisation in this particular section. Statistics are quoted below.

Return for the year ended 31st December, 1969.

Number of persons vaccinated through the Authority's approved arrangements under Section 28 of the National Health Service Act.

A. CONTACTS (Circular 19/64)

(i) No. skin tested	...	...	...	...	42
(ii) No. found positive	...	...	...	...	14
(iii) No. found negative	...	...	...	...	27
(iv) No. vaccinated	...	...	...	...	24

(Some Heaf tests were for diagnosis only)

B. SCHOOL CHILDREN AND STUDENTS (Circular 19/64)

(i) No. skin tested	...	...	...	...	1163
(ii) No. found positive	...	...	...	...	169
(iii) No. found negative	...	...	...	...	958
(iv) No. vaccinated	...	...	...	...	944

It will be seen there was a welcome increase in this work.

Vaccination against Influenza

This was confined to vulnerable groups, viz. children in institutions or those, such as district nurses, whose continuing health was vital to the community. 444 were so protected.

Section 27 — Ambulance Service

The Worcester City and District Voluntary Ambulance Service is responsible for this work under an agency agreement with the City Council. The service covers the southern part of the County as well as the entire City area. Its ability to function efficiently at a very economic level is due to general support by volunteer members of the St. John Ambulance Brigade and the British Red Cross Society who give valuable and effective help mainly in the evenings and weekend periods.

Mr. G. C. Hutchison, Ambulance Officer, reports :

The number of patients carried over the year still continues to rise; this increase is mainly for general treatment cases including day cases to Powick Hospital. It is interesting to note that by more efficient co-operation the number of journeys has been reduced, though the mileage has increased. This is due to the fact that more patients have to travel longer distances by road as a result of lack of railway facilities, centralisation of specialist treatment and early discharges from hospital involving out-patient treatment as stretcher cases.

Vehicles :

The present fleet strength is as follows :

- 8 Stretcher/Sitting Case Ambulances stretcher 2 berth
- 1 Single Stretcher Long Distance Ambulance
- 1 Special Services Vehicle

During 1969 two Stretcher/Sitting Case Ambulances were replaced by Automatic Transmission Ford Transit Conversion type ambulances suitably modified under the direction of the Ambulance Officer.

Staff :

In spite of the increase of work, there was again no increase in staff, although frequently it was apparent that the service was under extreme pressure.

Training :

Resulting from the Miller report on Ambulance Services Training, arrangements were made to send personnel on Department of Health and Social Security approved courses, financial provision being made to continue this policy in the forthcoming year.

Local In-Service training courses were arranged for all full-time ambulance personnel on the following subjects :

- Treatment of respiratory illnesses
- Treatment of nervous and mental disorders
- Lifting and handling of patients and use of the trolley type stretchers
- First aid and ambulance aid subjects
- Priorities at the scene of an accident
- Revision on use of specialised oxygen and resuscitation equipment
- Driver Attendant responsibilities

Cases undertaken during the year :

					1969	1968
Accident or Emergency Cases	...	...	...	...	1,275	1,271
Infectious Cases	...	...	...	...	887	880
Others	...	...	...	...	24,084	22,403
				Total	26,246	24,554
Sitting Cases	...	...	...	...	20,122	17,967
Sitter 2 Cases	...	...	...	...	1,661	2,116
Stretcher Cases	...	...	...	...	4,463	4,471
Journeys	...	...	...	...	7,071	7,641
Total Mileage including Residue				...	103,732	97,236
Average Miles per patient	...	...	...	...	3.95	3.96

Transport of Chiropody Patients :

Number of Persons carried	...	...	557
Mileage	...	...	3,534

General Ambulance Service :

During the year, 831 patients were carried over a distance of 27,104 miles at a cost of £1,239 6s. 3d.

Section 28 — Prevention of Illness, Care and After Care

(a) Prevention of Deafness

At the end of the year there were 328 children under the age of two years on the All Risks/Observation Register. These are children who by reason of their family history, difficulties at birth, or early illness, are at more than normal risk of developing defects or handicaps. These children are supervised regularly so that any appropriate treatment or training may be commenced at the earliest possible moment.

113 children failed their first hearing test and had to be re-tested, the small number who failed the second time being referred for further investigation.

I should like to thank Mr. T. S. Stewart, Consultant E.N.T. Surgeon at the Worcester Royal Infirmary, for his co-operation and help in this work.

(b) Prevention of Tuberculosis

Four persons died from respiratory tuberculosis during the year and three from non-respiratory tuberculosis. Notifications of this disease remain low and this year, those of the respiratory form fell dramatically.

Year	Respiratory		Non-Respiratory	
	Notifications	Deaths	Notifications	Deaths
1960	33	9	1	0
1961	22	6	1	1
1962	33	7	2	0
1963	15	6	2	0
1964	20	5	2	0
1965	15	5	1	0
1966	20	4	3	0
1967	16	1	4	0
1968	15	2	3	3
1969	8	4	5	2

After Care :

At the end of the year 15 patients were being supplied with free milk. Clothing, bedding and nursing aids remain available as necessary.

(c) Convalescence

Six patients were sent for convalescence under the auspices of the Health Committee, while others were sent by various Charities, for whose help we are most grateful.

(d) Health Education

Dr. Douglas Snell undertakes the supervision of health educational activities amongst our staff and reports as follows :

The pattern of health education work by members of this Department continued on the same lines as in the last few years. For a detailed list of the subjects with which health education is most concerned and the action we are taking, reference should be made to the Annual Report for 1968 pages 40—42.

Secondary schools, including some independent schools, continue to ask for advice and assistance in bringing home to their children the health hazards that face them in school and even more after they have left school. This is dealt with in the separate Annual Report upon the School Health Service.

The Health Education Council, having put Smokers Disease at the head of its list, carried out an experiment on a national scale in 1969 to determine the value of poster hoardings as a medium of health education. The poster selected showed an X-ray picture of a diseased lung and carried the caption “ Why learn the truth about lung cancer the hard way ? ” Worcester City was used as one of the control areas where the poster was not shown and this Department was asked to make no change in its normal health education programme. In the places where the poster was exhibited and also in the control areas, people were to be stopped at random in the streets before and after the experiment and questioned about their smoking habits and any changes in them. The results of the experiment are still awaited.

The latest annual report of the Chief Medical Officer of the Department of Health and Social Security stresses more strongly than hitherto the important role that can be played by doctors, nurses and teachers. They should give a lead to the community by giving up cigarette smoking themselves and recommending the same to those they come in contact with most — patients, parents and all young people. Early in the year the central Department of Health made a free issue of large numbers of a pamphlet, which had proved useful in Scotland, entitled “ How you can give up smoking — Hints by a Doctor ”

This was issued not only to local health offices, but to all general practitioners for the use of their patients.

For the third year running the College of Education invited us to take part in an informal discussion on the venereal diseases. It was encouraging to note that most of the questions and comments of the students concerned the right way of helping school children to face the problem. This is indeed necessary in view of the disturbing rise in the incidence of gonorrhoea among young people in their teens in the country as a whole. Fortunately the figures for Worcester continue to be well below the average.

No course was held at the Technical College concerning Food Retailing and Catering, but suitable posters and leaflets were made available to Public Health Inspectors responsible for the supervision of food premises.

Two courses of lectures were given in First Aid for the St. John Ambulance Association and assistance was given with several examinations and competitions between first aid teams.

All the doctors and nurses of the Health Department are considerably interested in health education. A large number of talks and lectures were given both in the City and other areas. We also took part as speakers in group discussions, symposia and conferences.

(e) Meals on Wheels

This service is undertaken by the Welfare Committee, the meals being prepared at Hillborough and delivered throughout the town by the Women's Royal Voluntary Service. During the year the Welfare Committee agreed to a substantial increase in the number of meals provided, a decision which evoked the general approbation of the multitude.

(f) Chiropody Service

The majority of our patients were aged 65 and over. Indeed, of a total 1,345, there were 1,217 in this category. The others were mainly younger, but handicapped persons.

The bulk of our treatment is given at the clinic at Church House which accounted for 2,476 separate treatments during

the year. A further 1,587 resulted from domiciliary visits and 407 persons were attended to in the chiropdists' surgeries. A total in all of 4,470 treatments were arranged by the Health Committee, who also provided transport when necessary.

(g) Cervical Cytology

The testing of cervical smears is combined with the routine examination of breasts and our statistics for the past four years are quoted below.

Year	Clinic Sessions	No. of Smears Taken	No. of Positives
1966	3 or 4	2,960	14
1967	4	2,512	8
1968	2	1,430	6
1969	2	1,371	8 (2 breasts)

Dr. Margaret Bartholomew, who has been doing valiant work in persuading women to have this test, including a good deal of informal talks at Clubs and Works Canteens, reports that we have had more new patients than expected and as a result have not quite kept up with our schedule for re-screening. She was disappointed to find that many patients asked to come for a repeat smear did not respond to the invitation and yet we have had two instances of re-call patients, negative in 1966, but with abnormal changes occurring in the short spell of four years.

In considering the statistics quoted above, reference should be made to the small group of women referred to consultants so that cancer of the body of the uterus can be excluded. These detailed investigations have not yet been completed.

Section 29 — Home Help Services

I am indebted to Miss C. J. Pain, Home Help Organiser, for the following report :

For the Home Help Service, the year 1969 certainly "Went out like a Lion". On account of the 'flu epidemic we shall

specially have cause to remember the Christmas period. Anxiety was great wondering if householders — sick in bed and living alone — were having sufficient help to see them through the long holiday period. As Home Helps went off duty sick, householders were crying out for more help, and relatives who would perhaps normally have given assistance were ill and house-bound themselves. As many as 17 Home Helps fell victims of the virus during the week commencing December 29th, and because of their absence from duty, 93 householders were without any help. We endeavoured to cover the cases which were in most distress and needing daily attention, trusting that the non-urgent cases would manage without suffering too much inconvenience.

In the Home Help Service we define a case as an emergency when a person is sick or helpless, and is entirely reliant on some other person to light a fire and to prepare food — or even to do essential shopping. Great emphasis is often put on cleaning, and although undoubtedly it is a very important task in the duties of a Home Help it is not a priority necessity matter, and it is not unusual at any time to receive a request for immediate help, and when the preliminary investigation is made only floors need to be attended to, and bedrooms cleaned. A householder often agitates for more help, and when extra time is provided it is not put to the good use which was intended, but the routine cleaning and polishing is unnecessarily performed twice during the week instead of only once. The Home Help finds this arduous and boring. We realise that in some cases it is not the actual help which is needed, but the Home Help's company to relieve loneliness.

Householders' help is continually having to be adjusted according to the need. Decreasing and terminating the services of a Home Help in a household is often a very difficult undertaking as householders do not usually take kindly to having their help reduced. It is felt that often it would help enormously if the person who makes a request for help to be increased for a patient could mention to us when it is felt that the crisis is over, and things can return to normal again. This would enable help to be sent to someone more in need of it.

During 1968 we provided 186 new cases with help, and although we had a slightly lower caseload at the beginning of 1969 the demand for help during the 12 months was much

greater, and 236 new householders benefitted from our service—50 more than in the previous year.

	Cases on Books January 1st	New Cases covered During the Year	Total Cases covered during the year
1968	521	186	707
1969	495	236	731

These cases fell into the following categories — only one person is represented in each household :

	Old Age (over 65 years)	Chronic Sick	Mentally Disordered	Maternity	Others	Total
1968	586	60	6	17	38	707
1969	604	58	6	12	51	731

From January 1st, 1969 to the end of September, we had a full-time equivalent of 51 Home Helps, and at the beginning of October, 1969, we were allowed to appoint an additional full-time equivalent of 4.

CARE OF THE AGED

During 1969 the Medical Officer of Health was appointed Director of Welfare. The Welfare Committee accepted the following recommendations which are now being implemented :

- 1 The appointment of a Senior Social Worker to undertake the supervision of Welfare Community Services.
- 2 The attachment of social welfare officers to general practices in the City.
- 3 A revised scheme of admissions to Part III Accommodation under the direction of the Senior Social Worker and a senior District Nursing Sister. Dr. Brierley and Dr. Rogers of Shrub Hill Hospital very kindly agreed to act as overall advisers.
- 4 Increased use where appropriate, of our Old Persons Homes for the day care of the older persons resident in the surrounding area.
- 5 Our Principal Nursing Officer, Miss Olive Keywood, to act as nurse adviser on nursing practice at the Old Persons Homes.

- 6 An increase in Meals on Wheels.
- 7 The development of sub-contract and related work at Unity House for the physically handicapped and chronic sick.
- 8 The joint visiting of physically handicapped and chronic sick by a social welfare officer and senior district nurse so that a mutually agreed assessment and delineation of their needs can be prepared and appropriate decisions made as to the sorts of equipment and services to be provided.
- 9 The institution of a central records service for Health and Welfare Departments.
- 10 An increase in the amount of temporary accommodation, which by the end of the year had been largely achieved. Apart from the three flats at Hillborough, five houses were also allocated to meet the need of the homeless.

It is probable that next year my welfare duties will revert to the proposed new Social Services Department and to use a popular local phrase — *Dimidium facti qui coepit habet*.

Clinic for the Retired

Dr. Robin Steel, who very kindly undertook the medical examinations at our screening clinic, was forced by the demands of his busy practice to give up this work towards the end of the year. We hope that we will be able to obtain a successor in the near future as our screening clinic for the elderly, whose main purpose is to keep people fit and active in their declining years, has proved very popular.

MENTAL HEALTH SERVICES

Mr. Paul Griffith, our Senior Mental Welfare Officer, reports as follows :

Staff Changes

Mr. P. Jelf joined the staff in July, 1969, having just completed a two year course at Plymouth Polytechnic for the National Certificate in Social Work. Apart from the normal range of duties he will be taking special responsibility for the social work with the mentally handicapped adults attending Perryfields Adult Training Centre. Prior to his training Mr. Jelf was employed by the Department of Health and Social Security in Gloucestershire.

After a relatively short stay of nine months, Mrs. B. Wilson resigned her appointment as mental welfare officer to join her family in South Africa. She was replaced by Mrs. K. Aitzetmuller, who had worked previously at Central Hospital, Warwick, in the Department of Psychiatric Social Work, and prior to that as a Medical Social Worker in London. Mrs. Aitzetmuller will take a special interest in the mentally handicapped children in the City and in particular, those attending Lower Wick Junior Training Centre.

Staff Training

Mr. D. McGilvray, mental welfare officer, has been seconded to a two-year full time course at Lanchester Polytechnic, Coventry. He will sit for the National Certificate in Social Work in July, 1971, and will then return to work in this Department.

Statistics

Mental Illness

Admissions to Powick Hospital during the year ended 31st December, 1969 :

		Male	Female	Total
Informal Admissions	...	125	229	354
Compulsory Admissions	...	25	35	60
Total Admissions		150	264	414

Mentally Subnormal Patients

	Male	Female	Total
In Hospitals	45	33	78
Receiving Supervision ...	61	43	104
Admitted to Hospitals ...	3	3	6
Attending Lower Wick Junior Training Centre			26

Community Care

1969 has been a year in which there has been increasing emphasis nationally on the care of the mentally handicapped in the community. In particular, Local Authorities are anxious that every effort should be made to avoid admitting the mentally handicapped into long stay hospitals when, for example, parents become elderly and are no longer able to care for their children as they would like to. Clearly it is inappropriate to admit such a mentally handicapped person into hospital life if he or she could be accommodated in a hostel or in lodgings with a family. This also greatly facilitates visiting by the parents who would otherwise have to journey long distances to one of the far flung hospitals for the mentally subnormal.

We look forward to the projected extension of Perryfields Hostel next year and are pleased that the boarding scheme whereby a subsidy can be paid to a landlady willing to accept a mentally ill or handicapped person, has been further extended.

Worcester Society for Mental Welfare

Once again considerable support has been given to our Mental Health Services by the members of this Society who so often provide the financial backing required by an emergency situation. It is particularly pleasant that the Chairman of the Worcester Society for Mental Welfare is also our Chairman of Health Committee holding his kaaf with great dexterity over both ventures. Apart from financial help the Society undertakes a considerable amount of home visiting and in this connection we are particularly grateful to Mrs. Lloyd, who also acts as Honorary Secretary.

Mrs. Mary Lloyd, Honorary Secretary, reports :

The work of the Society continued in much the same way as in previous years. There was an increase in the number of applications received for financial help and the following figures give particulars of these cases :

Perryfields — Hostel	...	...	1
Training Centre			3
Family Unit	...		2
City Cases	...	...	18
		Total	24

Fund raising activities were more successful and the Society was able to give favourable consideration to every application for assistance.

Ninety-six Christmas gifts were purchased and distributed to the Perryfields units, City families and one hospital patient, and during the year, a member of the Committee continued to send a birthday card to each trainee.

Once again, the Society was most grateful to the public for gifts of furniture, clothing, etc., for the very needy families, who have been visited regularly.

The Society has continued to maintain the closest co-operation with the local authority, in particular the Mental Welfare Department, and this has been much appreciated.

Perryfields

I am indebted to Mr. W. Baylay, Manger/Superintendent, Perryfields, for the following reports :

Adult Training Centre

Attendances during the year have been very high. 95 per cent have been regular attenders, but there are still a few parents who use the Centre as a "convenience", keeping their son or daughter away whenever they wish.

There is a very small minority group of parents who have in the past, and rightly so, clamoured for something to be done

for their children, somewhere for them to go to relieve them of the heavy burden they have to bear. Now that they have somewhere — a Training Centre where they receive further education, training in housecraft, social training and, very important, how to adjust to the community a chance to become an integral part of the working population, and above all a new found happiness with their colleagues, they fail to take full advantage of these facilities.

Swimming classes have had to be discontinued because we have been unable to replace the instructor who left. I hope to re-introduce this when the staff undertaking Diploma Courses have returned to the Centre.

Industrial contracts continue to full capacity and we are constantly searching for new projects.

Our outing during the summer took us to Drayton Manor Park where everyone thoroughly enjoyed themselves. The weather was glorious and the Fun Fair did a roaring trade. The caterers put on an excellent lunch and there were long faces when it was time to leave.

Christmas came and with it the usual festivities.

I am very grateful to the staff for their efforts throughout the year, sometimes under most trying conditions.

Hostel

Perryfields Hostel caters for 12 patients, male and female. In the main it is a place for those who have been having psychiatric treatment in hospital, are now recovered and fit to return to the community, but have no suitable home or lodgings in which to stay. Until this accommodation can be found, the convalescents are admitted to the Hostel from which they go out to work in suitable employment each day.

During the year there were 9 admissions, 5 male and 4 female. Two came from hospital for rehabilitation, 5 were admitted from the community for such reasons as loss of accommodation and incompatibility with the rest of the family; one was admitted at the request of another authority and one came for a short stay period.

Subsequently four returned to an independent life, suitable accommodation having been found for them. Only in one instance was it necessary for a resident to return to hospital for treatment and re-assessment.

Worcester Society for Mentally Handicapped Children

The work of this Society is known and appreciated by all with an interest in handicapped children to whose care and development they show a very real devotion. I am happy to present the report of Mrs. D. N. Hawthorn, Honorary Secretary.

Financially, 1969 has been a most rewarding year for our Society; the house-to-house collection in April and the Autumn Fayre contributing very greatly towards this.

Unfortunately we were unable to obtain suitably central premises for a Christmas Card Shop, although we had a great many volunteers to "man" this, had we been able to do so. However, we did extremely well through our usual channels.

It is still our ambition to provide a Hostel in Worcester, and with this in mind, we intend to invest the greater part of our monetary resources in the hope that one day it will be used for this purpose.

The Christmas Party was voted a great success by everyone and thoroughly enjoyed by the children.

Speakers to our Society during the year included Miss Kenney, Speech Therapist; Mr. Redford, Tutor to N.A.M.H. Birmingham Diploma Course; Dr. G. M. O'Donnell, Medical Officer of Health, and Mrs. Cole, our Regional Officer.

Family Rehabilitation Unit

Next year we hope to have a third flat in use, but this year there are still only two flats available for the rehabilitation of families where one or both parents have a history of mental illness aggravated by accommodation problems, or where lack of suitable accommodation is causing considerable mental stress.

The flats are used purely as a temporary aid and it is rare for a family to stay longer than a year. We owe a great deal to the generosity of the Housing Committee who have always been willing to rehouse our tenants on completion of rehabilitation.

Of the two families to which I referred last year, one has done very well and has left the unit for Council accommodation and it is expected that the other will follow in the near future.

Cases of infectious Diseases notified during the year 1969, classified in age groups

Notifiable Disease	Number of Cases Notified																											
	Age Groups																											
	Under 1 year		Over 1 and under 2		Over 2 and under 3		Over 3 and under 4		Over 4 and under 5		5 years—9 years		10 years—14 years		15 years—24 years		25 years—44 years		45 years—64 years		65 years and over		Age Unknown		Totals		Grand Total	
M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M		F
Scarlet Fever	—	—	—	—	2	—	1	1	3	—	6	1	2	1	1	—	—	—	—	—	—	—	—	15	3	18		
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Poliomyelitis (Paralytic)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Poliomyelitis (Non-Paralytic)	1	3	—	—	2	1	—	3	3	1	1	3	—	—	1	—	—	—	—	—	—	—	17	11	28			
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria	—	—	—	—	—	—	—	—	1	—	7	—	—	—	—	—	—	—	—	—	—	—	5	7	12			
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1	3			
Meningococcal Infections	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Encephalitis (infective)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Encephalitis (post infectious)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Enteric or Typhoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	
Food Poisoning	1	—	—	—	—	1	—	1	—	—	—	—	—	—	2	1	—	—	—	—	—	—	6	4	10			
Tuberculosis (Respiratory)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7	1	8			
Tuberculosis (Non-Respiratory)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	1	5			
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	9		
Infective Jaundice	—	—	—	—	—	—	—	—	—	—	1	—	2	—	1	—	—	—	—	—	—	—	8	1	—	95		
Totals	4	3	5	1	4	2	7	5	8	1	10	11	5	1	5	3	7	—	9	2	1	1	—	65	30	95		

INFECTIOUS DISEASE

I should like to record my appreciation of the unfailing co-operation given to this Department by Dr. R. J. Henderson, Director of the Worcester Public Health Laboratory, and his staff.

Diphtheria : For the eighteenth successive year there has been no case of diphtheria in the City.

Scarlet Fever : There were 18 cases of scarlet fever, none of which showed what might be termed pre-war severity.

Whooping Cough : For the first time in the history of Worcester there were no notifications of whooping cough. As Mrs. Patrick Campbell used to say, it is not the death of old friends, but the absence of old names, that I miss.

Measles : It is with some embarrassment that I report that there were only 28 cases of measles notified. This miniscule amount, even in a non-measles year, must be due to the frenzied efforts of doctors, nurses and clinic staff in the City, to vaccinate as many children as possible against this disease. If this happy state prevails we shall soon be like Solomon Islanders with the word measles missing from our vocabulary. However, there is always the modern equivalent of missionaries, gunboats and rum.

Dysentery : 12 cases were notified during the year.

Paratyphoid : A case of paratyphoid occurred in one of our hospital nurses.

Infectious Hepatitis : 9 cases were notified during the year.

Food Poisoning : 10 cases were notified during the year, two being the victims of *Salmonella typhimurium*, the remainder being claimed by various salmonellae, viz. *infantis*, *enteritidis*, and Sir Francis Drake's own favourite, *Salmonella panama*.

Venerael Disease : Dr. Charles Romer, who is our chief bastion against the onslaughts of *trepanoma pallidum* and

other creatures of venereal acquaintance, has supplied me with the following figures :

TOTALS		1969	1968	1967	1966
Syphilis	... ..	8	4	4	7
Gonorrhoea	Total	106	84	49	60
	„ Female	42	22	12	14
	„ Male	64	62	37	46
Non-specific urethritis		75	58	61	38
New Cases	... ..	470	376	356	342
Attendances	... ..	1,303	1,049	949	1,065

He emphasises that in 1969 there was :

- (1) A 26 per cent increase in gonorrhoea
- (2) A 29.6 per cent increase in non-specific urethritis
- (3) A 25 per cent increase in the number of new cases attending

However, these statistics relate to the total work of the Special Clinic which takes in patients from a wide area. The new patients from the City itself totalled 179, of whom 48 had gonorrhoea (a 50 per cent increase), 3 had the more chronic forms of syphilis, and 127 other venereal conditions. Only one resident was subject to a primary attack.

Dr. Romer stresses the value of determined contact tracing, which is easier each year as the public becomes better informed. He notes that while health education does not stop people getting V.D. it does make them seek early treatment and co-operate with those engaged in the search for contacts.

First attendances at the special clinic at the Worcester Royal Infirmary were as follows :

					1969	1968	1967
Syphilis	...	...	...	...	1	—	2
Gonorrhoea	...	...	...	...	48	32	20
Other conditions	...	...	...	...	127	106	111
Total					176	138	133

Influenza A

Dr. R. J. Henderson comments that the epidemic of Hong Kong influenza in Worcester between December, 1968 and April, 1969, was mild, with about 5 per cent of the population affected. In residential communities, however, attack rates of up to 75 per cent were seen.

OTHER HEALTH DEPARTMENT SERVICES

(a) **Housing Reports**

The Medical Officer of Health acts as adviser to the Housing Committee and its officers in the allocation of extra medical points to applicants for Council housing. This is a very useful adjunct of my work as it brings me into contact with many ill or troubled persons who may need other forms of help as well as housing. During the year, 157 applications of this nature were investigated, in addition to numerous requests for a transfer to other accommodation also on medical grounds.

(b) **Nursing Homes**

There are two private nursing homes within the confines of the City and these were inspected at appropriate intervals.

(c) **Examination of Plans**

All plans are vetted by the Medical Officer of Health and the Chief Public Health Inspector. This is a very useful chore and during 1969, 1,271 were scrutinised.

(d) **National Assistance Act, 1968, Section 47, and National Assistance (Amendment) Act, 1951.**

Compulsory removal to hospital or old persons' home was undertaken four times during the year. In three instances removal was dictated by the urgent necessity to secure adequate treatment for a neglected or very ill person, one of whom had refused all offers of help.

(e) **Medical Examinations**

Health Department medical staff examined 341 local authority staff for fitness to take up new appointments, and 87 persons for fitness to enter the teaching profession or to attend training colleges. This work continues to increase.

(f) **Cremations**

1,235 medical certificates were scrutinised by the Medical Referee and his Deputy during the year.

(g) **Vaccination against Anthrax**

During the year vaccination against anthrax was given to employees at a local Tannery as follows :

Completed Primary :	5
Booster Dose only :	10

ENVIRONMENTAL HYGIENE

Report of Mr. T. W. Marsden, M.R.S.H., M.A.P.H.I., Chief Public Health Inspector.

Drainage and Sewerage

The rebuilding and enlarging of the sewage treatment plant was completed during the year, and the plant is now fully operational.

The City Council and the City Engineer are now to undertake the re-sewering of the North part of the City.

There are 82 houses drained to septic tanks or cesspits. There are no houses which have to rely on pail closets.

Offensive Trades

At the end of the year, the following premises were in operation :

	Old Established	Annual Licence	Total
Fellmongers ...	1	—	1
Hide and Skin Dealers	—	1	1
Rag and Bone Dealers ...	—	2	2

Rag Flock Act, 1951

There is one establishment registered under the Rag Flock Act.

Animal Boarding Establishments Act, 1963

There is one establishment registered under the above Act which has been inspected.

Pet Animals Act, 1951

Three premises are registered under the above Act and have been inspected.

Pharmacy and Poisons Act, 1958

Eighteen licences have been issued under the above Act.

Clean Air Act, 1956-1968**Industrial**

1. Dark smoke	Number of contraventions recorded	...	Nil
	(a) successful prosecutions	... ..	Nil
	(b) unsuccessful prosecutions	... ..	Nil
2. Furnaces (Section 3)	(a) notifications received	... ..	27
	(b) application for prior approval	... ..	27
	(c) number of applications granted	... ..	27
3. Grit and Dust emissions (section 5)	(a) number of contraventions	... ..	Nil
4. Height of chimneys	(a) number of applications	... ..	21
	(b) number of cases in which alterations were required	... ..	6
	(c) number approved	... ..	21
	(d) number of chimneys erected not complying with the approved plans	... ..	Nil
	(e) number of chimneys erected outside the control of Section 10	... ..	Nil

Domestic Nil

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963
Registrations and General Inspections

Class of Premises	Number of Premises newly registered during the year	Total number of registered premises at end of year	Number of registered premises receiving one or more general inspections during the year	Number of persons employed
Offices	11	187	95	3,618
Retail Shops	9	374	258	2,639
Wholesale shops, warehouses	4	43	37	1,213
Catering establish- ments and canteens	4	91	84	754
Fuel storage depots	—	2	1	14
Totals	28	697	475	8,238*

Number of Visits (including General Inspections) 1,123.

* males 2,973; females 5,265

APPENDIX "A"

Infringements of the Act and Regulations made thereunder

Number of Notices served — 5

Number of Defects found — 37

*No. of
Defects*

SECTION 4 (CLEANLINESS)	...	...	...	2
SECTION 6 (TEMPERATURE)	...	...	...	6
SECTION 7 (VENTILATION)	...	...	...	3
SECTION 8 (LIGHTING)	...	...	...	3
SECTION 9 (SANITARY ACCOMMODATION)			...	3
SECTION 10 (WASHING FACILITIES)	...	...		4
SECTION 11 (DRINKING WATER)		...	...	1
SECTION 12 (CLOTHING ACCOMMODATION)			...	1
SECTION 16 (FLOORS, PASSAGES AND STAIRS)	...			3
SECTION 24 (FIRST AID)	...	...	...	5
SECTION 49 (REGISTRATION)	...	...	...	1
SECTION 50 (ABSTRACT OF THE ACT)			...	5

APPENDIX "B"

ACCIDENTS

Number of Accidents Notified — 50

Number of Accidents Investigated — 11

(39 Accidents were not investigated due either to late notification or to being of a trivial nature).

<i>Persons sustaining Injury</i>				<i>Place of Accident</i>			
Man	...	...	12	Office	...	...	2
Woman	...	...	32	Shop	...	...	20
Boy	...	...	2	Warehouse	...	...	23
Girl	...	...	4	Catering Estab.	...	...	5

Type of Accident

Falls	...	...	...	...	...	20
Striking against an object or being struck by an object	...	...	...	...	...	24
Machinery and Transport	...	...	...	...	...	1
Use of Hand Tools	...	...	...	...	...	Nil
Miscellaneous	...	...	...	...	...	5

Nature of Injury

Fractured Limbs	...	...	...	...	...	10
Sprains and Strains	...	...	...	...	...	17
Open Wounds	...	...	...	...	...	6
Bruising, Crushing and Concussion	...	...	...	...	...	13
Burns	...	...	...	...	...	1
Miscellaneous	...	...	...	...	...	3

Site of Injury

Head	...	...	...	...	...	1
Back	...	...	...	...	...	11
Upper Limbs	...	...	...	...	...	19
Lower Limbs	...	...	...	...	...	16
Multiple	...	...	...	...	...	3

FACTORIES ACT, 1961.

1. Inspections for the purpose of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	16	5	—	—
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority ..	336	47	10	—
3. Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ...	18	13	—	—
Total ..	370	65	10	—

2. Cases in which Defects were found.

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness	3	3	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	1	1	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences :					
(a) insufficient	—	—	—	—	—
(b) unsuitable or defective	6	6	—	4	—
(c) not separate for sexes	—	—	—	—	—
Other offences against the Act not including offences relating to Outwork	—	—	—	—	—
Total	10	10	—	4	—

3. Outwork (Sections 133 and 134).

Nature of Work	Section 133			Section 134		
	No. of outworkers in August list	Cases of default in sending lists	Prosecutions for failure to supply list	Instances of work in unwholesome premises	Notices served	Prosecutions
Making etc., of apparel ...	575	—	—	—	—	—
Furniture and upholstery ...	12	—	—	—	—	—
Nails, Rivets and Staples ...	—	—	—	—	—	—
Carding, etc., of buttons, etc.	—	—	—	—	—	—
Total ...	587	—	—	—	—	—

Summary of Routine Work of the Public Health Inspectors

Nature of Visits, Inspections, etc.						Number of Visits etc
Accumulations	...	...	...	...	...	200
Animals	...	...	...	...	...	67
Ashbins	...	...	...	...	...	Nil
Bakehouses	...	...	...	...	...	34
Canal Boats	...	...	...	...	...	Nil
Cesspits	...	...	...	...	...	2
Clean Air Act : New plant	...	...	...	...	...	22
Smoke Inspections	...	...	...	...	...	71
Smoke observations	...	...	...	...	...	29
Closets: Water	...	...	...	...	...	16
Pail	...	...	...	...	...	Nil
Dairies	...	...	...	...	...	34
Dangerous Structures	...	...	...	...	...	28
Ditches and Water Courses	...	...	...	...	...	35
Drains : Inspections	...	...	...	...	...	477
Smoke Tests	...	...	...	...	...	14
Colour Tests	...	...	...	...	...	65
Entertainments Houses	...	...	...	...	...	Nil
Exhumations	...	...	...	...	...	Nil
Factories : Power	...	...	...	...	...	47
Non-Power	...	...	...	...	...	5
Other	...	...	...	...	...	13
Food : Manufacturing Premises	...	...	...	...	...	34
Examinations	...	...	...	...	...	357
Shops and Warehouses	...	...	...	...	...	433
Vehicles	...	...	...	...	...	88
Hotels and Restaurant Kitchens	...	...	...	...	...	186
Houses : Let-in-lodgings	...	...	...	...	...	279
Overcrowding	...	...	...	...	...	17
Vermin	...	...	...	...	...	97
Section 17	...	...	...	...	...	249
Section 42	...	...	...	...	...	83
Public Health Act	...	...	...	...	...	1831
Hairdressers	...	...	...	...	...	4
Ice Cream : Shops	...	...	...	...	...	26
Manufacturers	...	...	...	...	...	6

Infectious Disease Visits	...	...	...	...	276
Lectures	...	...	...	...	10
Licensed Premises	...	...	...	...	59
Local Land Charges reports	...	...	...	...	1852
Markets	...	...	...	...	103
Merchandise Marks Act	...	...	...	...	Nil
Miscellaneous Nuisances	...	...	...	...	139
Noise	...	...	...	...	176
Offensive Trades	...	...	...	...	8
Offices, Shops and Railway Premises Act :					
Inspections	...	...	...	...	1123
Accidents Investigated	...	...	...	...	11
Outworkers	...	...	...	...	6
Pet Animals Act	...	...	...	...	3
Rent Act	...	...	...	...	8
Rodent Control	...	...	...	...	190
Sampling : Bacteriological :					
Milk	...	...	...	...	126
Cream	...	...	...	...	7
Ice Cream	...	...	...	...	30
Food	...	...	...	...	16
Swabs and Rinses	...	...	...	...	3
Plate tests	...	...	...	...	20
Chemical :					
Milk	...	...	...	...	142
Cream	...	...	...	...	7
Ice Cream	...	...	...	...	Nil
Food and Drugs	...	...	...	...	74
Food (Complaints)	...	...	...	...	19
Fertiliser and Feeding					
Stuffs	...	...	...	...	16
Formal samples	...	...	...	...	Nil
Water : Tap, Swimming					
Baths, etc.	...	...	...	...	27
Schools	...	...	...	...	12
Septic Tanks	...	...	...	...	32
Sewers	...	...	...	...	47
Slaughterhouses :					
Public	...	...	...	...	166
Private (Upton-on-Severn R.D.C.)	...	...	...	...	37
Special Visits	...	...	...	...	626
Tips	...	...	...	...	14
Van Dwellings	...	...	...	...	11
Water Supply	...	...	...	...	20
Wells	...	...	...	...	Nil

Number of Notices served and Summary of Work carried out during the Year

Number of Preliminary Notices served	...	...	...	71
Number of Verbal Notices	...	...	...	158
Number of Notice Letters Re : Noise	...	...	...	15
Re : Houses in Multiple Occupation				38
Re : Housing Defects	...			113
Re : Improvement Grants	...			9
Re : Food Hygiene	...			132
Re : Factories	...	...		24
Re : Mscellaneous Nuisances				93
Re : Offices, Shops and Railway Premises Act				35
Re : Clean Air Act	...			43
Re : Prevention of Damage by Pests Act				19
Number of Notices (Statutory) served :				
Public Health Act, 1936, Section 39	...	...		14
Section 45	...	...		2
Section 93	...	...		17
Section 138	...	...		Nil
Public Health Act, 1961, Section 15	...	...		3
Section 26	...	...		2
Housing Act, 1957, Section 15	...	...	...	1
Clean Air Act, 1956, Section 16	...	...	...	Nil
Noise Abatement Act, 1960	...	...	...	1
Offices, Shops and Railway Premises Act, 1963	...			5
Number of Complaints received and investigated	...			720
Number of Notices sent regarding infectious disease	...			25
Keeping of Animals	...	...	...	11
Accumulations	...	...	...	43
Vermin	...	...	...	6
Rats and Mice	...	...	...	21
Dustbins	...	...	...	4
Drains Cleared	...	...	...	52
Drains Repaired	...	...	...	33
Water Closets	...	...	...	22
Cesspools	...	...	...	Nil
Septic Tanks	...	...	...	3
Water Supply	...	...	...	7
Paving	...	...	...	9

Roofs	...	...	...	...	...	...	40
Spoutings		...	...	...	...	...	46
Chimneys		...	...	...	...	...	13
Dampness		...	...	...	...	...	36
Sinks	...	...	...	...	...	...	3
Windows	...	...	...	...	...	...	39
Floors	...	...	...	...	...	...	11
Walls, External		...	...	...	...	...	19
Walls, Internal		...	...	...	...	...	26
Ceilings	...	...	...	...	...	...	14
Staircases		...	...	...	...	...	Nil
Doors	...	...	...	...	...	...	11
Fireplaces	...	...	...	...	...	...	4
Offensive Trades	...	...	...	...	...	...	1
Clean Air	...	...	...	...	...	...	6
Noise Nuisance	...	...	...	...	...	...	5
Overcrowding	...	...	...	...	...	...	12
Factories : Cleanliness		...	...	...	...	...	5
Temperature			...	...	...	...	Nil
Ventilation		...	...	...	...	...	1
Lighting		...	...	...	...	...	Nil
Sanitary Accommodation			...	...	...	...	6
Welfare Regulations			...	...	...	...	Nil
Offices, Shops and Railway Premises :							
Overcrowding		...	...	...	...	...	Nil
Heating	...	...	...	...	...	...	9
Lighting	...	...	...	...	...	...	16
Ventilation	...	...	...	...	...	...	21
Accommodation for Clothing			...	...	...	...	2
Seating	...	...	...	...	...	...	Nil
Cleanliness	...	...	...	...	...	...	10
Washing Facilities	...	...	...	...	...	...	13
Sanitary Accommodation		...	...	...	...	...	8
Drinking Water	...	...	...	...	...	...	1
Eating Facilities	...	...	...	...	...	...	Nil
No Abstract provided		...	...	...	...	...	8
Stairs and Floors etc.		...	...	...	...	...	36
Fencing	...	...	...	...	...	...	5
First Aid	...	...	...	...	...	...	12
Registration	...	...	...	...	...	...	5
Machinery	...	...	...	...	...	...	1

Food Hygiene Regulations :

Wash hand basins	...	...	...	...	...	16
Sinks	...	...	...	...	...	5
Internal Structural Repairs			...	...	...	62
Cleanliness	...	...	...	...	...	71
First Aid Equipment			...	...	...	10
Hot and Cold water			...	...	...	21
Equipment	...	...	...	...	...	28
Personal Hygiene	...	...	...	...	...	18
Clothing Accommodation	...	...	...	...	...	2
Mobile food vans	...	...	...	...	...	18

Rodent Control

The following table summarises the work carried out by the staff of one Rodent Officer and one Rodent Operative.

Number of Complaints received	...	...	...	426
Number of Inspection carried out	...	...	...	812
Number of Treatments carried out	...	...	...	790
Types of Properties Treated :				
Number of Treatments (Local Authority Properties)	...			111
Number of Treatments (Dwelling Houses)	...	...		303
Number of Treatments (Business Premises)	...	...		32
Number of re-visits during treatments	...	...	...	1616
Number of Smoke and Drain Tests	...	...	...	9
Number of Inspections made with no treatments	...			61
Number of Treatments to River, Canal and Brook Banks				178
Inspections and Treatments of Tips, Allotments, Playing Fields and Parks	...	...	...	166

These figures include visits to hospitals, clinics, school meal kitchens, schools, tipping ground, public slaughterhouse and sewage disposal works, treatments being carried out where and when necessary.

1,000 sewer manholes were treated by outside contract during the year in the areas where rats were most prevalent.

Approximately 6,300 rats were exterminated according to the figure formula of the Ministry of Agriculture, Fisheries and Food Poisons Estimates.

Milk**Bacteriological examinations**

Type	Test	Satisfactory	Unsatisfactory	Void	Total
Pasteurised Milk	Methylene Blue	76	14	8	98
Pasteurised Milk	Phosphatase	98	—	—	98
Sterilised	Turbidity	22	—	—	22
U.H.T. Milk	Colony Count	3	—	—	3
(Untreated)	Biological	3	—	—	3

Chemical Examinations

Raw Milk , informal samples taken	...	...	...	116
Found deficient in fat	...	...	...	4
Found deficient in solids non fat	...	...	...	22
Raw Milk (Channel Island) informal samples taken	...	...	...	26
Found deficient in fat	...	...	...	1
Found deficient in solids non fat	...	...	...	Nil
Cream , informal samples taken	...	...	...	7
Found deficient in fat	...	...	...	Nil

Of the samples found deficient in milk fat and solids not fat all, except two, were found to be genuine on bulking or as a result of the freezing point test. Two samples were found to contain small quantities of extraneous water. The farm was visited and a defect found in the "in churn" cooler. This cooler was immediately renewed.

Other Bacteriological Examinations**Ice Cream**

Thirty samples were taken with the following results :

Grade 1	...	...	...	...	...	11
Grade 2	...	...	...	...	...	13
Grade 3	...	...	...	...	...	4
Grade 4	...	...	...	...	...	2
Swabs of ice cream plant	...	...	...	...	...	5

Bacteriological examinations were made as a result of investigation or complaint for the following :

Sausages	...	...	...	...	...	...	...	1
Mineral water	...	...	...	...	...	...	...	1
Cheese	...	...	...	...	...	...	...	2
Beef	...	...	...	...	...	...	...	2
Cooked chicken	...	...	...	...	...	...	...	4
Rabbit	...	...	...	...	...	...	...	1
Scampi	...	...	...	...	...	...	...	1
Bacon	...	...	...	...	...	...	...	1
Trout	...	...	...	...	...	...	...	1
Butter	...	...	...	...	...	...	...	1
Rice	...	...	...	...	...	...	...	1

Other Chemical Examinations

Apples	...	...	...	...	...	...	...	1
Bread	...	...	...	...	...	...	...	1
Beechams Powder	...	...	...	...	...	...	...	1
Black Pudding	...	...	...	...	...	...	...	1
Butter	...	...	...	...	...	...	...	1
Canned Meats	...	...	...	...	...	...	...	4
Canned Milk	...	...	...	...	...	...	...	1
Cheese	...	...	...	...	...	...	...	1
Cream	...	...	...	...	...	...	...	7
Curry Powder	...	...	...	...	...	...	...	1
Dates	...	...	...	...	...	...	...	2
Dried Fruit	...	...	...	...	...	...	...	4
Faggots	...	...	...	...	...	...	...	3
Fish Paste	...	...	...	...	...	...	...	1
Fruit Drinks	...	...	...	...	...	...	...	6
Game Soup	...	...	...	...	...	...	...	2
High Protein Food	...	...	...	...	...	...	...	1
Jam	...	...	...	...	...	...	...	1
Jellatine	...	...	...	...	...	...	...	1
Meat	...	...	...	...	...	...	...	2
Margarine	...	...	...	...	...	...	...	1
Meat Pies	...	...	...	...	...	...	...	6

Pepper	...	...	...	...	...	...	...	2
Potatoes	...	...	...	...	...	...	...	1
Sausage	...	...	...	...	...	...	...	8
Sausage Rolls	...	...	...	...	...	...	...	3
Saccharin Tablets	...	...	...	...	...	...	...	2
Suet	...	...	...	...	...	...	...	1
Tomato Sauce	...	...	...	...	...	...	...	2
Treacle	...	...	...	...	...	...	...	1

Complaints

Lemonade	...	...	...	...	...	...	...	1
Scampi	...	...	...	...	...	...	...	1
Sweet Corn	...	...	...	...	...	...	...	1

Food Premises — Food Hygiene (General) Regulations, 1960

Main Trade Class		Number of premises	Number complying with Reg. 16	Number to which Reg. 19 applies	Number of premises complying with Reg. 19
Bakers	...	7	7	7	7
Butchers	...	53	53	53	53
Cafes', Restaurants, Snack Bars	...	55	55	55	55
Confectioners Flour		14	14	14	14
Confectioners Sweets		62	62	30	32
Fish and Chips	...	24	24	24	24
Fishmongers	...	18	18	18	18
Greengrocers	...	51	51	51	51
Grocers	...	169	169	169	169
Public Houses	...	125	125	125	125
Off Licences	...	50	50	50	50
Social Clubs	...	55	55	55	55
Supermarkets	...	12	12	12	12
Warehouses	...	18	18	18	18
Works Canteens and School Kitchens	...	50	50	50	50

Fertilisers and Feeding Stuffs Act

Seven informal samples of fertilisers and nine informal samples of feeding stuffs were taken during the year. All were found to be satisfactory within the allowed limits of variation.

Foodstuffs (other than Butcher's Meat at Slaughterhouses) condemned during the year

Tinned Foods (9,947 tins)	...	...	...	64,702 lbs.
Fish	...	...	...	1,728 lbs.
Meat	...	...	...	98,618 lbs.
Miscellaneous Foods (Cereals etc.)	...	...	...	12,240 lbs.
Total — 79 tons, 2 cwts., 3 qtrs., 20 lbs.				

The great increase in the condemnation of meat was due to (a) a fire of a refrigerator at a food manufactory; and, (b) transit delays in delivery of imported meat containers.

Meat Inspection

Weight of meat and offals condemned at the Public Slaughterhouses amounted to 35 tons, 2 cwts., 1 qtr., 23 lbs.

Prosecutions

(1) Loaf of bread containing a foreign body	...	Fined £20
(2) Sale of mouldy pastry	...	Fined £20
(3) Unhygienic condition of food delivery vehicle	...	Fined £15
(4) Sale of unsound sausages	...	Fined £10
(5) Sale of mouldy cake	...	Fined £20
(6) Sale of mouldy pork pie	...	Fined £30

In addition the Health Committee gave instructions to issue warning to 15 traders for offences in conjunction with the sale of food in contravention of the requirements of the Food and Drugs Act.

Liquid Egg (Pasteurisation) Regulations, 1963

There are no egg pasteurisation plants in the district.

Poultry Inspection

There are no poultry processing premises in the district.

Carcases and Offal Inspected and Condemned in whole or in part

	Cattle Excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	4,118	845	648	60,246	11,568
Number inspected	4,118	845	648	60,246	11,568
<i>All diseases except Tuberculosis and Cysticerci</i>					
Whole carcases condemned	15	77	13	327	117
Carcases of which some part or organ was condemned	939	580	—	4,617	1,347
Percentage of the number inspected affected with disease other than tuberculosis	23.16	77.75	2.00	7.01	11.64
<i>Tuberculosis only</i>					
Whole carcases condemned	—	—	—	—	—
Carcases of which some part or organ was condemned	—	—	—	—	156
Percentage of the number inspected affected with tuberculosis	—	—	—	—	1.34
<i>Cysticercosis</i>					
Carcases of which some part or organ was condemned	16	4	—	—	—
Carcases submitted to treatment by refrigeration	16	4	—	—	—
Generalised and totally condemned	—	—	—	—	—

Housing

(1) Common Lodging Houses

There are no registered common lodging houses in the City. Since the closing down of the Reception Centre in 1968, the majority of itinerants bypass Worcester, but there are still several well known characters sleeping rough near the riverside meadows and Perry Wood.

(2) Houses in Multiple Occupation

Although these houses do not present a very serious problem, there is a slow yearly increase in their numbers, now 92. There is also a tendency for persons of the various nationalities to acquire houses in particular areas of the City.

(3) Slum Clearance

The end of the present slum clearance programme is in sight and 1969 saw the beginning of the running down process.

No clearance areas were declared. 45 individual unfit houses were represented.

The progress in Slum Clearance from 1954 until the end of 1969 was as follows :—

Unfit houses represented	...	...	...	...	2,113
Tenants rehoused	...	...	...	...	1,635
Sub-tenants rehoused	...	...	...	...	141
Tenants and Sub-tenants who found own accommodation	...	...	...	...	257
Houses vacant when represented	...	...	...	...	106
Houses demolished under Housing Act	...	...	...	...	1,643
Unfit houses demolished privately	...	...	...	...	57
Houses closed on Closing Orders	...	...	...	...	101
Houses made fit and removed from programme	...	...	...	...	80

During the year, 111 houses were demolished under the Housing Act, 11 houses were converted to other uses, 27 fit houses were demolished to facilitate redevelopment of the sites, 6 houses were converted into flats providing a further 6 units of dwelling accommodation.

(4) **Re-housing**

The City Council completed 49 new houses during the year and 128 families were rehoused from unfit houses.

Also during the year, 383 privately built houses were completed.

Improvement of Older Houses

With the run down of the slum clearance programme, your Public Health Inspectors are now directing their attention to the improvement of older, though structurally sound, houses either as individual cases or in potential improvement areas.

The new provisions in the Housing Act, 1969, respecting improvement grants and qualification certificates for rent adjustment involves the Health Department and its Inspectors more than any other Officer or department of the Corporation. The inclusion of some items of repair in improvement grants is not only welcomed but wise: for what profiteth a man if his new grant assisted bath is but supplementary to a shower from a leaking roof.

Rent Act, 1968

There were no applications for certificates of disrepair during the year.

HOUSING STATISTICS

1. Inspection of Dwelling-houses during the Year :

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	... ..	828
(b) Number of inspections made for the purpose		2,459
(2) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	... ..	41
(3) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for habitation	... ..	53

2. Remedy of Defects during the Year without service of formal notices :

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers		42
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3. Action under statutory Powers during the Year :

(a) Proceedings under Section 9, Housing Act, 1957 :	
(1) Number of dwelling-houses in respect of which notices were served requiring repair ...	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices :	
(a) By Owners	Nil
(b) By Local Authority in default of owners	Nil
(b) Proceedings under Public Health Act, 1936 :	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	11
(2) Number of dwelling-houses in which defects were remedied after service of formal notices	
(a) By owners	11
(b) By Local Authority in default of owner	Nil
(c) Proceedings under Sections 16, 17, 23 and 28 of the Housing Act, 1957 :	
(1) Number of dwelling-houses in respect of which Demolition Orders were made ...	22
(2) Number of dwelling-houses in respect of which Closing Orders were made ...	9
(3) Number of dwelling-houses demolished in pursuance of demolition orders ...	46
(4) Number of Demolition Orders determined ...	Nil
(5) Number of Closing Orders determined ...	7
(6) Number of dwellings closed on undertaking	Nil
(7) Number of reconditioning schemes accepted	2
(8) Number of demolition orders substituted for Closing Order	2
(d) Proceedings under Section 18, Housing Act, 1957 :	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	2
(2) Number of undertakings accepted to close houses for human habitation ...	Nil
(3) Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or room having been rendered fit ...	Nil
(4) Reconditioning schemes accepted in respect of dwelling-houses	Nil

WATER SUPPLY

On the first of April the Worcester City Council's Waterworks was vested in the South West Worcestershire Water Board. And, so, after almost 300 years, history was repeated; for on the 28th April, 1689, the Mayor, Aldermen and Citizens granted a lease on the City Waterworks for a period of 500 years at a chief rent of 40/- a year and a couple of capons to Mr. Mayor. In July, 1756 was on offer for sale "a third share of the City Waterworks, being in good repair, and now on the Annual Rent of £170; capable of great improvement".

One thing hasn't changed: the supply is still entirely obtained from the River Severn, though now the water is treated by settlement, filtration and chlorination.

There is no plumbo solvent action in the water. The average daily consumption for all purposes is 4,530,000 gallons or 63.3 gallons per head per day.

There is a separate piped supply to 24,666 houses with a population of 71,278. 94 houses with a population of 262 share taps in common wash-houses. There are no houses relying on water from wells.

Four wells are still in use at business premises.

Routine sampling of water is carried out by the Water Board and the Public Health Department. During the year the following samples were submitted for analysis:

	Bact. Exam.	Chem. Exam.
Raw Water	48	11
Raw Water after settlement ...	82	—
Primary Filter water	50	—
Final Water before Chlorination	59	—
Final Water after Chlorination ...	97	12
Check samples from tap in laboratory	60	—
Consumer tap samples	4	2

Swimming Baths

Again this year, careful surveillance was kept of the learner swimming pools at the various schools. 26 samples of bath water were submitted for analysis.

Summary of Chemical Analyses of Tap Water
Year ending 31st December, 1969

				<i>Parts per million</i>		
				<i>Min.</i>	<i>Max</i>	<i>Average</i>
Solids in Solution (Dried at 180°C)				210	580	376
Chlorine present as Chloride	...	...		42	124	73
Hardness Non-Carbonate	...	...		30	105	71
Hardness Carbonate	...	...	...	92	158	121
Hardness Total	...	...	...	144	250	192
Ammoniacal Nitrogen	...	...	...	Nil	0.046	0.09
Albuminoid Nitrogen	...	...	...	0.03	0.08	0.057
Nitrate Nitrogen	...	...	...	3.7	6.4	4.8
Nitrite Nitrogen	...	...	...	Nil	0.01	Trace
Oxygen absorbed in 4 hours at 27°C (N/80 Permanganate)	...	...	...	0.1	1.8	1.1
Toxic Metals	...	...	...	Nil	Nil	Nil
Total Residual Chlorine	...	...		Nil	0.8	0.22
Fluoride	...	...	...	0.1	0.2	0.15
Phosphate as PO ₄	...	...	...	0.33	1.4	0.83
pH				7.1	7.8	7.47

Summary of 12 monthly analyses of water leaving the Water-works.

